



## **EVENT ORGANIZER APPLICATION**

**Complete this application and mail it to arrive at the Onslow County Environmental Health at least 20 days prior to the event date.**

1. Organizer Name: \_\_\_\_\_
2. Complete Address: \_\_\_\_\_
3. Organizer Phone: (8 am-5 pm): \_\_\_\_\_ Cell Number: \_\_\_\_\_
4. Email address: \_\_\_\_\_
5. Name of event: \_\_\_\_\_
6. Event location: \_\_\_\_\_
7. Dates and times of event: \_\_\_\_\_
8. On-site coordinator(s) contact information.

Name	Responsibility	Contact Number(s)

9. Total number of vendors expected: \_\_\_\_\_

10. Number of:

**Food tents** \_\_\_\_\_

**Food booths** \_\_\_\_\_

**Mobile food units (MFU's)** \_\_\_\_\_

**Push carts (PC's)** \_\_\_\_\_

11. Will the organizer be supplying water to food booths and food tents? ☐ Yes ☐ No

If yes, what is source of water? \_\_\_\_\_

12. Will the organizer be supplying electricity to the food booths and tents? ☐ Yes ☐ No

If yes, describe: \_\_\_\_\_

13. Describe liquid waste/grease disposal method and schedules for pick-up.

14. Describe garbage disposal method and schedules for pick-up. \_\_\_\_\_

15. Number of toilet facilities provided? \_\_\_\_\_ Type: \_\_\_\_\_

16. Number of hand wash facilities provided? \_\_\_\_\_

17. Attach a list of proposed food vendors with the name, address, and day time phone number for each operator.

18. Time of food vendor arrival and set-up: \_\_\_\_\_

**NOTE:** Vendors must arrive no later than the designated set up time as agreed upon by you, the organizer, and the Environmental Health Specialists. Environmental Health Specialist cannot be delayed by late vendor arrivals. **Please notify vendors that late arrivals will not be permitted to sell food requiring a Health Department permit.**

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Signature of Organizer: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_

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**Event Organizer applications can be delivered or mailed to:**

Onslow County Environmental Health

234 NW Corridor Blvd.

Jacksonville, NC 28540

Phone: (910) 938-5851

Fax: (910) 989-5819